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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/654,996	<b>FILING DATE</b> 09/05/2000 <b>RULE</b> -	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1615	<b>ATTORNEY DOCKET NO.</b> TOBINICK 3.0-011 (CIP)
<b>APPLICANTS</b> Edward L. Tobinick, M.D., Los Angeles, CA ;				
<b>** CONTINUING DATA *****</b> <i>Virginid</i> THIS APPLICATION IS A CIP OF 09/563,651 05/02/2000 WHICH IS A CIP OF 09/476,643 12/31/1999 , U.S. Pat. no: 6,177,077. WHICH IS A CIP OF 09/256,388 02/24/1999 ABN				
<b>** FOREIGN APPLICATIONS *****</b> <i>none</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 11/01/2000</b> <b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>met</i>		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> -	<b>TOTAL CLAIMS</b> 84
Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>INDEPENDENT CLAIMS</b> 7		
<b>ADDRESS</b> Ezra Sutton PA Plaza 9 900 Route 9 Woodbridge ,NJ 07095				
<b>TITLE</b> TNF modulators for treating neurological disorders associated with viral infection				
<b>FILING FEE RECEIVED</b> 471	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	